

**COMMISSION ON AGING
MEETING SUMMARY MINUTES
September 22, 2016**

Members Present	Members Absent
Charles Kauffman	Morton Faller
Judith Peres	Helen Abrahams
Richard Jourdenais	Syed Yusuf
Miriam Kelty	
John Honig	Alumni members
Amoke Alakoye	Marcia Pruzan
Judith Levy	Elaine Binder
Mary Petrizzo	Joe Petrizzo
Rudy Oswald	Mona Negm
Hileia Seeger	Morton Davis
Jerry Morenoff	Vivien Hsueh
Noelle Heyman	Beth Shapiro
Bonnie Klem	
Revathi Vikram	Liaisons
Barbara Mulitz	Jim Campbell, Commission on Veterans Affairs
Karen Maricheau	Phil Smakula, Department of Recreation
Isabelle Schoenfeld	Emil Wolanin, Department of Transportation
Paul Del Ponte	Jim Resnick, MCFRS
Stephanie Edelstein	Austin Heyman, Office of Community Partnerships
David Denton	
Monica Schaeffer	Guests
Tamara Duell	Isiah Leggett, County Executive
Sue Guenther	Nancy Floreen, County Council President
Grace Whipple	Uma Ahluwalia, Department of Health and Human Services
	Gabe Albornoz, Department of Recreation
	Staff
	Jay Kenney, Department of Health and Human Services
	Odile Brunetto, Department of Health and Human Services
	Mario Wawrzusin, Department of Health and Human Services
	Leslie Frey, Department of Health and Human Services
	Tremayne Jones, Department of Health and Human Services
	Pazit Aviv, Department of Health and Human Services
	Shawn Brennan, Department of Health and Human Services
	Lylie Fisher, Department of Health and Human Services
	Tina Purser-Langley, Department of Health and Human Services
	Melanie Polk, Department of Health and Human Services

Commission Chair, Noelle Heyman, opened the annual meeting by welcoming Commissioners, liaisons, and guests.

She explained that this annual meeting is where the Commission sets priorities for the coming year. To help with this undertaking, key County officials and program managers would provide updates on programs and how the Commission might help them to address challenges they face in serving older residents. In addition, there would be a presentation on the Summer Study. This information would be synthesized and would form the basis for a discussion and setting of priorities.

Noelle then introduced the guest speakers and expressed appreciation for their efforts on behalf of County residents.

I. Presentations

County Council President Nancy Floreen discussed the FY17 budget, including: increased funding for Libraries, Recreation Department, Department of Social Services, and Fire Rescue; extension of hours for the Ride On Senior Ride Free program; and the property tax deferral program. The lack of conveniently located affordable housing continues to be a challenge. The increase in the county recordation tax will be used in part to expand affordable housing opportunities. The Department of Housing and Community Affairs (DHCA) and Department of Health and Human Services (DHHS) continue to focus on how to support those who need the most help.

Council President Floreen noted that the County senior population is expected to increase significantly over the next 15 years. There has been discussion in the Council about building height and density requirements. Traffic related safety is also an issue, including how to create a safe environment for cars, bikes and pedestrians. A related issue is school bus safety, and concern about those who fail to stop for flashing lights on school buses. COA members can help the County Council by being supportive, sharing ideas and advocating as a COA member and as an individual.

County Executive Isiah Leggett thanked Uma Ahluwalia and Gabe Albornoz on all that they have accomplished with the Senior Subcabinet and the December 2015 Summit on Aging. Mr. Leggett discussed the Summit on Aging video describing accomplishments between the first summit, in 2008, and 2015. Montgomery County has experienced the largest increase in the senior population in the region, and must continually find ways to meet their needs. Mr. Leggett stated that there is a misconception that because we are a relatively affluent county, we can meet all challenges. Paraphrasing former Vice-President Hubert Humphrey, Mr. Leggett observed that a community (government) is judged by how it treats those in the dawn of life, those in the twilight of life, and those in the shadow of life. A core principle in addressing the challenges of transportation, housing, and employment, is to ensure that people in the dawn, twilight, and shadows of life are treated with dignity and respect.

Montgomery County is becoming one of the most technologically advanced communities in the country, and provides resources for residents, including seniors, who need help with computer skills. However, there is also a challenge in getting word to people about the resources available to them.

Mr. Leggett also discussed the issue of lack of affordable housing, including rental housing, for seniors. He mentioned the new senior housing in downtown Silver Spring as an example of ensuring affordable options and encouraging diverse communities. His office met this week with apartment owners to begin a dialogue about affordable housing, including with the CoA. He encouraged the CoA to follow up.

Mr. Leggett discussed the need to promote the Design for Life Tax Credit Program, which provides three tiers of property tax incentives to make homes more accessible:

1. **Accessible Feature tax incentives** are for certain features that are permanently installed to improve access to or within an owner's principal residence (not limited to single-family homes).
2. **Level I (VISITable) tax incentives** are available for permanent installations to any new or existing single-family homes, townhomes and duplexes that meet Level I accessibility threshold.
3. **Level II (LIVEable) tax incentives** are available for permanent installations to any new or existing single-family homes, townhomes and duplexes that meet Level II accessibility threshold.

The Design for Life Accessibility Standards for Level I (VISITable) and Level II (LIVEable) incorporate design elements such as a no-step entrance, which make it easier and safer to accommodate a person living with a temporary or permanent impairment, accommodate friends or relatives who have mobility limitations or even bring in a baby stroller or move in large furniture. Ultimately, homes that incorporate these features will help people age in place more comfortably, conveniently and cost effectively.

Department of Health and Human Services (DHHS) Director Uma Ahluwalia provided updates on the Age Friendly Montgomery Advisory Group, which she co-chairs with Gabe Alborno. The advisory group has added new members and will meet on October 25th. There are also 10 workgroups. The workgroups have had some realigning and restructuring. The preliminary strategic plan will include each workgroup's vision, mission, priorities, goals and objectives, and action steps, and is expected to be ready in time for the development of the FY18 budget. Montgomery County must have a plan and a progress report in order to maintain WHO/AARP/AF (Age Friendly) status as an age friendly community. This will require a great deal of effort, and COA advocacy is needed. Uma also mentioned the tremendous increase in APS cases.

Department of Recreation (DOR) Director Gabe Alborno congratulated the COA on their advocacy and meaningful partnerships. Gabe stated that the strategic planning process will help carry the current administration to the end and set up the next administration with a strong foundation. Gabe highlighted the Dementia Friendly Initiative, for which a Steering Group has been formed. This group met to identify private and public partnerships and alliances. The first task is to get acquainted with the resources and opportunities available to older adults experiencing dementia and their families. Next, the group will identify partnerships and alliances to enhance programs and services, and to more effectively communicate what is available. The Steering Group will continue to meet and will include both public and private agencies.

The dedication and ribbon cutting ceremony for the new North Potomac Senior Center located at 13850 Travilah Road in Rockville will take place on Saturday, October 22nd at 10:00 am. The 33,000-square foot community recreation center, on approximately 17 acres, will include a social hall, senior/community lounge, computer lab, kitchen, gymnasium, exercise room, game room, art rooms, rest rooms, with space allocated for conference rooms, office and storage space.

There will be a smaller sub-committee formed internally within the recreation department to explore a rebranding of senior centers to make them a more vital place for people who would like to attend

events. The recreation department piloted “Senior Connect,” an intergenerational program through which youths connect with seniors in one-on-one consultations and group settings to teach technology and social media.

There was some discussion of options for those who need more support than is provided by regular senior center activities, but less than adult day care. Fairfax County offers a Senior Center Plus model. JCA has a grant to operate a memory loss program in Germantown.

Department of Transportation (DOT) Deputy Director Emil Wolanin discussed the Department of Transportation’s shift towards looking at transportation more holistically to include all modes of travel, including pedestrian access. He described the DOT vision as a seamless transportation system for people of all ages, incomes and abilities that supports a vibrant and sustainable community. The agency’s mission is to move people and connect places with the best transportation choices and services. There are five guiding principles:

- Provide an effective and efficient transportation system;
- Keep our system reliable, safe and secure;
- Engage and support our diverse community;
- Enhance quality of life;
- Be innovative and forward-thinking.

DOT is participating in Street Smart, a regional campaign to reduce pedestrian and bicyclist injuries and deaths by capturing attention and motivating behavior change. The Street Smart program emphasizes education of motorists and pedestrians through mass media. It is meant to complement, not replace, the efforts of state and local governments and agencies to build safer street and sidewalks, enforce laws, and train better drivers, cyclist, and pedestrians. The program is coordinated by the National Capital Region Transportation Planning Board (TPB), and is supported by federal funds made available through state governments, and funding from some TPB member jurisdictions. See PowerPoint titled *Street Smart FY2015 Year in Review* on DOT website.

Aging and Disability (A&D) Chief Jay Kenney welcomed new COA members and gave a brief description of the Health and Human Services organizational chart and the different programs within the department. DHHS is comprised of five operating service areas: Children Youth and Families, Behavioral Health and Crisis Services, Public Health Services, Aging and Disability Services, and Special Needs Housing. The largest areas are Children Youth and Families and Public Health.

Aging and Disability includes three primary programs. **Assessment and Continuing Case Management** provides multi-disciplinary assessments, care planning, and case management services to frail seniors and adults with disabilities to remedy and prevent abuse, neglect, self-neglect, exploitation, or inappropriate institutionalization. Services include Adult Protective Services (APS), Adult Evaluation and Review Services (AERS), Statewide Evaluation and Planning Services, Social Services to Adults, and Public Guardianship Program. The **Area Agency on Aging (AAA)** is responsible for the provision of a continuum of home and community-based services and provides staff support to the Commission on Aging. In conjunction with the community partners, the AAA is involved in administering County and State grant awards to contractors for services, public education/outreach, networking, and referrals. **Community Support Network for People with Disabilities (CSN)** provides services that enable individuals to remain in their home or in the least restrictive environment and provides general support, guidance, and assistance to clients with

developmental disabilities and their families. CSN coordinates and monitors services and supports (including crisis management, intervention, and school-to-work transition assistance) to clients with developmental disabilities eligible to receive services through the State Developmental Disabilities Administration (Coordination of Community Services Program); provides service coordination to eligible young people that are funded under the Maryland Home and Community Based Services Waiver for Children with Autism Spectrum Disorder (Autism Waiver Program); and provides financial assistance to State-funded providers who serve adults with developmental disabilities. CSN conducts site visits to group homes that serve developmentally disabled clients in the County and monitors contracts that provide services to people with various disabilities including visual and hearing impairments.

Jay discussed the Older Americans Act, originally enacted in 1965, which supports a range of home and community-based services, such as meals-on-wheels and other nutrition programs, in-home services, transportation, legal services, elder abuse prevention, and caregivers support. Older Americans Act programs are not means tested but they are targeted to certain vulnerable populations 60 years of age and older. The Older Americans Act was reauthorized in 2016 for FY17 through FY19. Among other provisions, the reauthorization strengthens the Long-Term Care Ombudsman program and elder abuse screening and prevention efforts, and promotes delivery of evidence-based programs, such as fall prevention and chronic disease self-management programs.

Jay discussed two DHHS programs that DHHS. Home Care Services provides personal care assistance to seniors and eligible adults with disabilities who are unable to manage independently due to physical and/or mental impairments. Home Care Services prevents abuse, neglect, and exploitation of vulnerable adults, and enhance overall quality of life by providing personal care, chore assistance, therapeutic support, self-care-education, occupational therapy intervention, and escorted transportation. The goal is to prevent or reduce the length of institutionalization, and help relieve caregivers of some of their responsibilities of care for disabled family members. The Adult Guardianship Program provides surrogate decision making for disabled adults adjudicated as incapacitated by the Circuit Court, and in need of the service. The program provides case management under the direction of the court and is only considered when there are no other alternatives.

Jay noted two additional DHHS challenges. The first is termination of the Money Management Program operated by Senior Connections. The second is the increase in hoarding, a complex issue that is a health hazard and also causes fires. Montgomery County established a multi-agency Hoarding Taskforce about five years ago. There is also a Gaithersburg task force.

Mario Wawrzusin, Administrator for Adult Protective Services (APS) and Clinical Services, Case Management/Continuing Care. Mario described APS, a state mandated program that investigates allegations of abuse, neglect, self-neglect and/or exploitation (including financial exploitation) of vulnerable adults, and provides services to reduce risk factors and promote protection of the health, safety and welfare of endangered, vulnerable adults. A vulnerable adult is someone who lacks the physical or mental capacity to provide for his/her daily needs. APS has experienced a 37% increase in reports over the past five years. As a mandated service, APS must follow up and cannot stop accepting referrals.

APS has seen an increase in financial exploitation reports since passage of the financial institution mandatory reporting law in 2012. Banks and credit unions are required to report suspected financial

exploitation of Marylanders age 65 and older. They must convey their suspicions within 24 hours by phone to Adult Protective Services or law enforcement and must follow up in writing. Financial exploitation is now 27% of all County APS cases. In 2012 there were 7 cases of financial exploitation and today there are 25 cases. APS is in need of additional staff. For comparison, Montgomery County has only one APS investigation team; the District of Columbia has two teams, for a population with similar demographics. The new MCFRS protocol for identifying vulnerable adults who receive Fire Rescue calls will likely result in more cases. As a mandated service, APS must respond. As a result, the wait list for other case management services grows.

In some situation, if there is no less restrictive alternative, the County will seek the appointment of a guardian. The public guardianship program, operated by the Area Agency on Aging, has also grown and is also in need of additional staff.

Pazit Aviv Senior Village Coordinator– provided an update on Villages.

Status Summary

- Since 2014-60% growth
- 20 active villages (6 charge fee. Most have scholarships)
- 10 developing
- A quarter of active villages included services to low income/diverse communities
- FY16 startup funds supported 7 villages with costs associated with development phase
- FY17 5 villages received County Executive community grants
- Estimated 2,500 County residents are involved with a village (member/volunteer)
- Estimated 40,000 people over 60 have access to a village

Progress #1 Outreach and Partnerships

- Increased awareness of villages and their value to the community
- Technical assistance reduces start up time and increases motivation to take the initiative
- JCA's Ride Scheduler doubled the number of organizations it serves and it poised to take on more
- City of Rockville poised to hire a full-time village facilitator (outcome of advisory group advocacy)
- Partnerships and collaborations between villages (BCC villages share events, resources, Village of Takoma Park and Silver Spring Village co-sponsor event). Plans are underway to greatly expand this area
- Partnerships with government (Fire Department, Keeping Seniors Safe, Aging and Disability, Behavioral Health, Consumer Protection, Rockville Senior Center etc.)

- Partnerships with private organizations (IONA, JSSA, Suburban, Silver Spring Town Center, Medstar, Adventist, etc.)

Progress #2 Faith Communities

- Faith communities express strong interest in aging in place and in working as interfaith coalition
- Anne Lipe, volunteer, is working on a faith communities survey in upper western part of the County
- Kasey Kaseman; Neighbors in Need Workgroup is poised to take on aging as a priority this year
- Several Muslim community centers begun developing aging programs
- Faith Communities serve as a strong link to ethnic groups

Progress #3 Ethnic Diversity

- Villages that serve diverse communities: are Village of Takoma Park, Silver Spring Village, Olney Home for Life, Muslim Community Center, Aging Well with Friends, East County Village Seniors and Greater Stonegate Village
- Long Branch is a hub for activity for a creative project with the Hispanic community. It brings together many different community organizations and county departments: A&D, Recreation, TESS Center, IPMACT of Silver Spring, community activist (Vivien Hsueh), CASA de Maryland and others).
- South East Asian group is starting up in North Potomac
- HHS has increased capacities for effective and comprehensive community outreach through Office of Community Partnership (Betty Lam's staff, Caregiver Support, Health and Wellness, Transportation program managers)

The ingredients for a successful neighborhood village is: **People Places and Plentifulness**

- **People Power.** There is no village without strong and committed leadership. No amount of funds will ever change that.
- **Community Cohesiveness.** If people do not feel they are a part of their community, they will not seek out a way to build stronger ties to it or neighbors to connect with.
- **Physical environment** plays a significant role in enabling a health community. Traditional suburbs are not conducive or optimal (no sidewalks to meet people, no easy access to community spaces, large homes far apart, no porches to sit at and greet neighbors)
- **Community building** take a long time. People are slow to warm up to new people and ideas. Transient neighborhood face a much more complicated situation.

- **Self esteem and expectations.** For some people who have never had a paid position or have worked low-paying jobs there is a perceived incapability of taking on a leadership challenge.

Shawn Brennan, Transportation and Mobility Manager, described the 3-year strategic plan and three priorities developed by the Age Friendly transportation workgroup. The priorities are: Awareness, Affordability and Accessibility. Goals include: expand free Ride On for seniors to daily (and potentially expand Call N Ride in the future); expand the pool of vetted, trained, volunteer drivers; provide accessible Uber trips in accessible vehicles. DHHS does have a small fund for Adult Foster Care clients to access escorted transportation for medical appointments approximately twice a month. There are about 12 people in the program, which has a budget of about \$38,000. More funding is needed. Another goal is communication – to let people know about county services, to encourage their use, and to get out the word in various languages. The COA alumni group is updating the CASSA Senior Resource Guide and will include transportation.

Lylie Fisher, Caregiver Coordinator. Lylie thanked the COA for identifying Caregivers as a priority in Montgomery County. She noted that caregivers comprise one of the highest demographics in the County, and they are a very diverse group. One of her tasks is to oversee the revision and translation of the Montgomery County Caregiver Supports and Aging Services fact sheet into eight languages.

Lylie reported that she, Pazit, Shawn, Tina, and others are developing internal protocols to ensure that they are not duplicating resources, and are using resources efficiently.

Lylie is also the staff coordinator for the Dementia Friendly America (DFA) initiative, and she described that effort. DFA is a nationwide program that was launched in 2015 at the White House Conference on Aging, Dementia Friendly America (DFA). It hosts online tools and resources about how to create communities that are more inclusive and supportive of people living with dementia as well as their caregivers. Montgomery County joined DFA in 2015. There will be a Dementia Friendly America kickoff event in 2016 to publicly announce Montgomery County as a Dementia Friendly City. Details will be announced later.

Starting in October there will be an insert in the Beacon Newspaper that highlights the range of programs provided by Montgomery County. Another resource is the Senior Resource Guide. Dennis Linders from CountyStat is working with Lylie to develop a new on-line DataMap for caregivers. An older adult or caregiver will be able to enter their home address into a system and locate caregiver resources in their community. Another goal is to educate front line staff at businesses such as banks and pharmacies about services available to caregivers. Councilmember Roger Berliner is hosting an invitation only roundtable on October 31st that will focus on in-home non-agency paid caregivers. The goal is to help identify challenges, and opportunities for education, legislation, and change.

Tina Purser Langley, Senior Health & Wellness Coordinator– Tina explained to the COA her position as a Health & Wellness Coordinator. Tina works with several groups, including Health & Wellness Committee, Age Friendly Advisory Group, End of Life Coalition, Vital Living Network and she also work on contracts and grants for evidence based health programs. Tina is working with Holy Cross Health and Adventist Health on a falls prevention program. She works on programs for

diabetes education and chronic disease management with funding from the Maryland Department of Aging (MDOA). She also works on the senior center dental program, and the public health contract that provides dentures for seniors. Tina spoke about MDOA's *Walk Maryland Day*, also called *Older Marylanders Walk a Million Miles*, which began in May 2016. On October 5th at 9:30am. there will be a walk at Margaret Schweinhaut Senior Center. Tina will be working on the two year *Stepping On* grant from MDOA that Jay mentioned earlier in the day. Aging and Disability will collaborate with Housing Opportunities Commission to do a falls prevention clinic at their locations and other locations in Montgomery County.

MDOA has allowed Aging and Disability to carry over into FY17, approximately \$37,000 in FY16 funds for the Medication Management Program. Senior Health and Wellness will work with one of Area Agency on Aging (AAA) programs to start a small pilot called *HomeMeds*, an in-home medication review and intervention with about 150 participants. In this program, a nurse will make home visits that will include a blood pressure check, home safety assessment, and a pharmacist review and recommendation for improvement. AAA staff enter medication and clinical information into a computer, the pharmacist reviews alerts and responds with documentation to AAA staff and/or physician's office, and a letter or phone call will be sent to client and physician's office.

Tina discussed *Bone Builders*, a volunteer led exercise program operating in 32 sites throughout the County, with 120 volunteers and more than 600 participants. This year Montgomery County celebrated their 10th year participating in Bone Builders with a celebration attended by Secretary Rona Kramer. Bone Builders is looking to expand into other locations. Friends House Retirement Community located in Silver Spring will begin a program in their independent living section this year. Tina reported that a new Fact Sheet on Health and Wellness programs and resources will be available in the next couple of weeks.

The End of Life Coalition has been reenergized with the help of commissioner Judy Peres. The End of Life Coalition committee is planning a large event scheduled for April 2017 around a Spanish language version of the film, *Being Mortal*. Partners will include the Latino Health Initiative, JSSA, and Hospice Caring.

Vital Living Network (VLN) has adopted a mini strategic plan that includes:

1. Reenergizing the Speaker Bureau—the committee will go into the community and talk about different programs throughout the community.
2. Moving Bodies—a workgroup which focuses on the walking programs throughout the County and how to get people engaged in walking.

Tina also discussed current priorities of Senior Health and Wellness which are: Medication Management and Falls Prevention along with Oral Care. Challenges include the lack of insurance coverage for oral health care for seniors. County clinics are unable to serve all who need the services; they serve fewer than 1,000 seniors per year and the waitlist is 7 to 10 weeks. The COA can support the Senior Health and Wellness by advocating for Medicaid coverage of oral care for adults, and for increased state funding for dental care.

Melanie Polk, Senior Nutrition Director– Melanie described the Senior Nutrition Program (SNP). The Senior Nutrition Program:

- Provides meals in congregate settings where activities and services for seniors are available
- Each meal meets 1/3 of the Dietary Reference Intakes (DRIs) for older adults and follows the Dietary Guidelines for Americans.
- Nutrition screening, nutrition education and counseling are available.
- There is a Senior Nutrition Hotline where a registered dietitian answers questions on Wednesdays from 9 to 11 a.m. about senior nutrition and food by calling (240) 777-1100.

The Senior Nutrition Program offers 32 Congregate Nutrition Sites that serve Traditional Meals, Kosher Meals, Korean Meal, Vietnamese Meals, Chinese Meals and Latino Meals. The Senior Nutrition Program also provides home delivered meals for seniors and persons with disabilities. People 60 years of age and older and their spouse of any age, as well as adults with disabilities, are eligible to participate. Voluntary and anonymous donations for the meal are encouraged. Seniors may bring guests—those under 60 years of age must pay full price for the meal.

The Senior Nutrition Program supports the cost of lunches served to seniors at the following nonprofit Adult Day Care Programs: Holy Cross Adult Day Center; Misler Adult Day Center; The Support Center; Winter Growth; CCACC Adult Day Care. The Senior Nutrition Program also offers exercise programs, computer training, games, arts and crafts, lectures, health and nutrition education and social activities.

Melanie discussed the Choice Program through which seniors have the choice of either a hot meal or a cold meal which includes soup and a sandwich. She discussed a pilot program that started in 2013 titled *Cold Boxed Lunch* in which 19 low-income senior buildings in the County that had not previously received any services from the nutrition program were entitled to box lunches two times a week for about 800 people who had difficulty obtaining food in the winter and difficulty cooking their meals. In FY16 the senior nutrition program finalized a program that was able to provide box lunches two times a week to those buildings for a total of four months in the winter only due to financial restrictions.

Melanie also spoke about the Senior Farmers Market program which the SNP gets about 700 coupon books worth \$30.00 each, which are distributed and redeemable at farmers markets. In previous years, people would stand outside the market beginning at 5am to get a coupon book, which was difficult and at times, chaotic. There is now a day of market lottery program and wait list system in place. The program is very popular, and over the last three years had the highest redemption rate in Maryland.

It currently serves about 6,000 seniors per year. In FY16 the SNP received \$30,000 in additional county funds for a contract with Food and Friends to serve modified diets to homebound adults who

have terminal illnesses. The SNP also received \$91,700 in county funds to expand the cold box meal program at 19 sites.

Among the challenges the SNP faces is the need for interpreters for the many program participants with limited or no English language skills. In addition, the new North Potomac Community Center has requested a senior lunch program for the significant population they are expecting. SNP monitors 32 contracts. Staffing has remained at only three FTE for 20 years. This severely limits the capacity to operate current programs or take on new initiatives.

Dental Services Summer Study and Recommendations–Tamara Duell and Mary Petrizzo

Tamara addressed the COA on “Expanding and Enhancing Dental Health Services on Older Adults,” the summer study she co-chaired with Mary Petrizzo. The summer study’s overall objective was to educate participants on the current state of oral and dental health programs and services in Montgomery County, to identify opportunities to enhance and expand these services, and to develop a plan and/or recommendations based on what the COA learned. The summer study benefited from participation by a wide range of experts in the area of oral health care for older adults.

Based on the summer study findings, 13 recommendations were developed in the following areas: Direct Services; Prevention, Education and Public Awareness; Public Policy and Legislative Action; and Strategic Planning.

A partial listing of Oral Health Considerations and Challenges for Older Adults include:

- Medicare and Medicaid do not provide dental coverage.
- The majority of older adults do not have dental insurance/coverage.
- Currently there is no “standard of care” in dentistry for older adults and the American Dental Association does not recognize geriatrics as a specialty.
- Many older adults do not see the need to go to the dentist.
- Individuals should continue to see a dentist for the remainder of their lives even if no teeth are present.
- As adults age, their teeth become less sensitive to pain potentially leading to a delay in care and more advanced disease if regular exams are not provided. In addition, older adults often take medications that mask pain.
- The majority of individuals who develop mouth cancers are seniors. Mouth cancer usually has no or minimal symptoms.
- Wait time and neglect lead to oral cavities creating the need for root canals.
- Many older adults opt for extraction because they cannot afford root canals.
- Many older adults, who need dentures, often cannot afford them.
- Lack of funding for root canals and dentures.
- There is a disconnect between primary care and dental care. Lack of referrals from primary care physicians.

- Many older adults cannot brush their teeth independently and./or forget to brush their teeth
- Lack of transportation to and from dental appointments and other mobility concerns.
- Lack of appointment options.
- Nursing facilities only require one (1) oral health check per year and it is usually completed by someone other than the dentist.
- Assisted living facilities do not have any oral health care requirements.
- The State of Maryland completed a study and examined nursing homes, nutrition sites, and assisted living facilities and found high need for dental care.
- More education is needed about good oral health care and the benefits of brushing teeth.
- Difficulty recruiting dentists to work in clinics and with older adults.
- Limited number of chairs at most dental clinics (space limitations).
- The majority of other states are more progressive in funding oral health services for adults.

The summer study available on the Commission on Aging Website.

Leslie Frey –Leslie is the legislative liaison from DHHS to the Office of Intergovernmental Relations. She is also staff liaison to Boards, Commissions, and Committees. She is at the meeting to discuss with the CoA, priorities for the upcoming state legislative session, which begins in January 2017.

II Brief Business Meeting

- The COA members unanimously approved minutes from the May 26th meeting which had been circulated previously.
- Treasurer's report. Bank balance remains unchanged.

Updates–

Phil Smakula–Department of Transportation currently operates 5 senior centers with the 6th opening in North Potomac in November. DOT has 13 active adult programs that operate two days a week in various community centers in Montgomery County. All the senior centers and the 13 active adult programs are also nutrition sites. The three sites along with the five senior centers that are currently operating offer curb to curb transportation either through a contract with JCA or the Department of Transportation, generally in a 3mile radius around each center. Department of Recreation oversees the Maryland Senior Olympics which is held from August to early September. The Senior Olympics offer 23 different sports for participants who are 50 years and over, and this year there were more than 1,300 participants from around the state of Maryland. They participated in more than 2,000 events.

The County also operates the Senior Sneaker Program, which offers individuals 55 and older the option to purchase a yearly pass for \$50.00 that would give them access to all recreation department weight and exercise rooms during operating hours. There are challenges within the department:

- Frail Seniors attending programs at the senior center. The senior centers are not equipped to handle those seniors due to lack of staffing.
- Would like to expand technology programs.
- Evening and weekend programs is a challenge due to the lack of funds to hire more instructors to teach class with the fees the instructor charges per hour.

Odile Brunetto- AAA Director

- The 10 Age Friendly workgroups are working on the 3year strategic plan, with a goal of having it completed in mid-October. Each of the 10 workgroups can propose 2 to 3 priorities to be worked on in the next 3 years.
- HHS is embarking on the mental health realignment process, on which a report will be out in January 2017. Rev is the CoA representative.
- Focus has been on food and security, County Council passed legislation this summer on reducing food and security by 10% each year; a consultant has been hired to put together a plan.
- EMS collects data on each home visit and must enter data into their system once the visit is complete if they discover a frail person may need a follow up with a social worker. In just one month of operation, the project resulted in 40 follow-ups.
- HHS has been working for 2 years with the Council on a multi-year plan to increase Adult Foster Care Group Home reimbursements. Going into the third year, HHS is expecting an increase of \$153,108.
- There is a wait 81 people for the Senior Care Financial Support for Caregivers program, which is a state funded program.
- There is a wait list of 77 people for the Group Home Subsidy program, a state funded program that currently serves 12 people. The good news is that the State has changed the formula for allocating funds and over the next 4 years. HHS should see an increase because of the readjustment of the formula, and should be able to serve about 40 people over the next 4 years.

Development of COA Priorities, and Discussion.

During the course of the day's presentations and discussion, Odile took notes on flip charts, and synthesized the challenges and recommendations provided by the presenters. Commissioners reviewed those notes and engaged in discussion.

Following this discussion, the Commission approved the priority areas below. These priorities will be the foundation for CoA advocacy during the coming year.

- APS
- Dental Care Medicaid

- Affordable and accessible housing
- Foster Care
- Transportation
- EMS Frequent Flyer
- Nutrition Program Staff
- Money Management
- Guardianship
- Funding for foster care group homes
- Seniors plus
- Expand Ride on beyond current hours
- Expand Recreation Department hours

Legislative Breakfast will take place on November 17, 2016 from 8:00-10:00 am at Holiday Park Senior center located at 3950 Ferrara Drive in Wheaton, MD. It will be immediately followed by the Commission meeting.

The meeting adjourned at 4:00 pm.

Respectfully Submitted
Stephanie Edelstein, Secretary